



**Healthy Relationships Workbook**

**Introduction**

Living and studying in the UK can be an exciting time. You get to experience exciting new things, make friends and start new relationships. But moving to a new culture can also be a bit confusing. Often, when we don’t know how things work in a new place, we might assume that they are the same as back home. But that is not always true, especially with personal relationships. We are all influenced by our upbringing and culture, traditions and social values. As a result we may interpret personal relationships differently.

When we have a personal relationship, we need to be comfortable with talking about it and finding out how the other person sees it. But starting the conversation is not always easy. You may feel nervous or embarrassed to talk about sex and relationships. Or you may feel excited and interested. Perhaps you are in a relationship at the moment. Or perhaps you have never had a relationship before. This booklet is designed for all students, regardless of their relationship status. It aims to help you develop your confidence about having conversations about healthy relationships, including communication, sexual consent and sexual health.

A partner can be somebody of any gender or sexual orientation. We are all on a wide spectrum of gender and sexuality. In the UK it is legal to be gay, bisexual, transsexual or transgender. It is illegal to discriminate against somebody because of their sexuality or gender.

Here are some useful terms:

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| **heterosexual** | People who are sexually attracted to the opposite sex |
| **lesbian** | Women who are sexually attracted to other women |
| **gay man** | Man who is sexually attracted to another man |
| **bisexual** | People who are sexually attracted to both sexes |
| **transgender** | Trans is used as umbrella term to describe somebody who feels their gender is different from gender given at birth |

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| **virgin** | Somebody who has never had sex before |
| **pregnant** | The condition of a woman who is going to have a baby |
| **contraception** | A form of protection to prevent an unwanted pregnancy. Commonly referred to as birth control. These can be in many different forms including: condoms, pills, patches, injections. |
| **STI or STD** | Sexually transmitted infection or disease. People are at risk of a STI or STD when they have unprotected sex with someone else and either person has a STI/STD. |
| **emergency contraception** | A pill women can take after unprotected sex with men to prevent unwanted pregnancy. Must be taken 72 hours (3 days) after sex to work effectively. This is not a form of preventative contraception. Commonly referred to as the "morning after pill". |
| **abortion** | Ending a pregnancy. Sometimes called a 'termination.' This can be through medication or surgery. Legal in the UK. Normally performed before 24 weeks. |
| **rape** | Forcing another person to have sex without their consent |

**Case Studies**

**Consider these questions:**

**1) What are the issues and problems?**

**2) What should the student do?**

**3) What might happen if the student doesn't do anything?**

**Case Study 1**

Student A tells you the following information about themselves:

"I am studying in the UK for the first time. My parents really want me to study hard and get the best possible grades. So, I spend a lot of my time studying! My parents say I shouldn't have any girlfriends/boyfriends whilst studying. I've never had a boyfriend/girlfriend before.

One month ago, I became really good friends with one student in my class called "Student X." We have to do a presentation for our course together. But perhaps we might become more than friends .….We go to the cinema together, cook food together and meet up after our classes every day. "Student X" texts me regularly… and last week we kissed for the first time. I don't know many other students at SHU. Student X is like my best friend here.

I started to have feelings for "Student X". Student X has invited me for a meal at their apartment tonight and will cook for me. Student X lives alone. I feel so nervous and confused! I don't know what Student X wants - is Student X inviting me tonight as only a friend or more than that … ? My parents would not like this situation! My other friends might think I am changing into a bad student if I start a relationship with "Student X". I really like Student X. What should I do …. ? "

**Consider these questions:**

**1) What are the issues and problems?**

**2) What should the student do?**

**3) What might happen if the student doesn't do anything?**

**Case Study 2a**

"I have dated my girlfriend for three months. It was going really well. But last week she told me some shocking news. She told me she was pregnant! I was so angry. I am young and we are studying in the UK. Our relationship is just a temporary thing for fun. It's nothing serious. I can't believe this is happening!

Why was she so stupid? She should tell me if she is using contraception or not. Why didn't she say something? I guess we should use condoms, but we never talked about it. I know it's my responsibility too. But I am too young to be a parent. I have to finish my studies! My parents don’t know I have a girlfriend. My parents will go crazy!

I have to submit my dissertation in a month. Now I can't concentrate on anything. She wants to talk with me so we can decide what to do next. What should I do?"

**Case Study 2b**

"I have dated my boyfriend for three months. It was going really well. But last week I took a pregnancy test. I found out that I'm pregnant. I am so shocked and scared. I'm young and didn't plan to become pregnant. I can't believe this is happening! We didn't talk about contraception. My boyfriend never asked me anything about it. I thought everything would be OK.

I never imagined I would be in this situation. I am here to study in the UK. I didn't expect to become a parent right now. I am very confused about what to do next.

Last week I told my boyfriend over the phone that I'm pregnant. He was very quiet. He didn't say much to me. He says we should meet soon to talk about what I should do next. I don't know what he wants us to do.

I haven't told any of my friends or family or anybody else. I have to submit my dissertation in a month. Now I can't concentrate on anything. What should I do?"

**Healthy Communication**

The students in the case studies are all experiencing communication problems with their partners. Many people find it difficult to openly talk about sex and relationships. However, it doesn't have to be embarrassing. If you do find it hard to talk about it, there are ways to help you make it easier.

Communication is important in any healthy relationship. It allows you to share your feelings and solve problems together. This is also true of your sex life, especially if something is worrying you.

It is important to talk about sex and contraception with your partner for many reasons:

* Having sex can raise the intensity of emotions that people feel for each other, in a serious or in a casual relationship. It’s important that you feel ready and confident in your decisions about having sex.
* To find out about your partner's sexual history to find out whether they have a sexually transmitted infection (STI) which could put you at risk.
* To make decisions which suit both of you. To share your thoughts, opinions and expectations.

If you find it hard to begin the conversation about contraception then check out the NHS website, which has some great tips:

<http://www.nhs.uk/Livewell/Talkingaboutsex/Pages/Talkingtoyourpartner.aspx>

**Tips include:**

* *When to talk.* This means finding a time and place where you both feel comfortable and relaxed. Talk in plenty of time before you have sex, so that you make a decision which suits you both. If you think you might have a one night stand with somebody, make sure you think in advance about when you will mention using a condom. Carry condoms with you and raise the topic before you start having sex.
* *How to begin the conversation.* For example you could say "I'd like to have sex with you, do you feel ready?"
* *Talking about sexual history.* You could say: "There's something I need to ask you: have you ever been checked for STIs?"

If you are already with a partner who you are having sex with, then you may find this website useful: <http://www.nhs.uk/Livewell/Goodsex/Pages/Talkaboutsex.aspx>.

**What is Consent?**

Having a sexual relationship is a personal choice - it's OK if you do, and it's OK if you don't. And it's also OK to have sex without being in a relationship so long as the situation is safe. In or out of a relationship, if you are having sex, it's important that both partners consent to it.

In the UK, consent means someone agrees, by choice, and has the freedom and capacity to make that choice. Capacity means for example that somebody is not drunk or high on drugs. If they are, then they do not have the capacity to consent to sex.

The age of consent in the UK is 16. Sex without consent is illegal in the UK, so every time you have sex you must give and receive consent. Full consent is given when there is verbal agreement together with facial expressions, body language and behaviour. Sex without consent is rape and is punishable in a law court.

Consent works both ways. When it comes to sex, this means that both people definitely want to have sex and consent to sex. Both people in the relationship must be sure that the other person definitely wants to have sex. This applies in lots of situations, for example:

- in a long term relationship

- in marriage

- if you have dated somebody for 3 months

- if you are going on a date for the first time

And did you know that sexual consent is like having a cup of tea?? Watch this video to find out more: "Sex is like a Cup of Tea" <https://www.youtube.com/watch?v=pZwvrxVavnQ>

**Signs of Sexual Consent**

What do you think are and aren't signs of consent to sex….?

**Verbal signs**

"I'm not sure" "I'm excited" "Perhaps" "Maybe"

"I feel good about this" "Definitely"

**Body language signs**

A woman is in a bar. She accepts a drink from a man she has not before. The man pays for the drink.

Looking relaxed, with relaxed arms and legs.

Laughter and/or smiling. Wearing a very short skirt with high heels.

Wearing lots of make-up. Wearing tight clothing.

Actively taking part. Shaking head .

Avoiding eye contact. Carrying a packet of condoms in a purse.

Nodding. Direct eye contact.

**Signs of sexual consent**

Consent should always be enthusiastic consent. The verbal and non-verbal signs of consent might be different for each person from different cultures. That's why communication, especially talking about sexual consent, is so important!

Wearing tight clothing or lots of make-up is not a sign that somebody is looking for sex or consents to sex. In the UK you may see people wearing different types of clothes and make-up according to what is in fashion, or what they like or prefer to wear.

A woman accepting a drink in a bar from somebody she does not know is not automatically consent to sex. There is only consent for sex if the woman enthusiastically agrees to have sex with the person who bought the drink and she is sober. If the woman is drunk she does not have the capacity to give consent to sex.

Do not accept a drink from somebody you do not know. You can't be sure it is safe and of the intentions of the person offering you the drink. For example there is a risk your drink could be tampered with, and drugs could be added without you knowing about it.

**Case Study 3**

**Part 1**

Student A is 19. She is studying in the UK for the first time. She has never lived away from her family before. Student B is 19. He is also studying in the UK for the first time and has never lived away from his family before. Both students are excited and happy to be in the UK.

A goes out for dinner with some friends in her first month in the UK and meets B. B is popular with everybody, and has many friends. A and B exchange mobile numbers and text each other for several weeks. They enjoy going on many dates and trips together. They spend a lot of time together.

One night, after a visit to the cinema, B invites A back to his house for some food. When they get to his house, B says all his housemates are away and they are alone. They start kissing in his bedroom and they both enjoy it. Student B says he would really like A to stay the night with him. She agrees.

**Questions**

Is sexual consent given by Student A and Student B in this situation? Why?

**Part 2**

A has stayed overnight at Student B's apartment many times already, and each time they have sex together when A stays over. All of their friends say they are a great couple.

One evening, after a night out, they go back to Student B's place. Student B starts kissing Student A. He really wants to have sex. A says that she isn't sure. She says she is worried about getting pregnant.

B says that he doesn't have any condoms, but he will be careful, he will pull out in time. He reassures her and says they have used this method before. Every time it has been fine, so there should be no problem now because there is proof that it worked for them before.

**Questions**

What do you think are the main issues here in this situation?

What should Student A do? What should Student B do?

**Part 3**

A says she doesn't want to take the risk. B continues to kiss her and suggests oral sex instead. She doesn't say anything but doesn't look happy. Student B asks if she is OK and she replies quietly "yeah I'm fine."

**Questions**

What are the issues in this situation?

What should student A do? What should student B do?

**Unhealthy Relationships**

If someone forces you to have sex without your consent, this is called rape and you should report it to the police. If you need help to report it or further advice, you can get help from a member of SHU staff.

We also encourage you to seek help if you feel you are in an unhealthy relationship. An unhealthy relationship may include a partner who is for example:

- Controlling and restricts who you can see

**-** Critical of your appearance and abilities

- Overly suspicious that you are cheating

There are trained members of staff at SHU who can help with wellbeing issues including:

* Student Wellbeing Team

<https://www.shu.ac.uk/current-students/student-support/student-wellbeing>

* Student Medical Centre

<http://www.studenthealthatshu.co.uk/>

* Student Support Officers (SSO). Please visit or email your faculty reception.
* International Experience Team

<https://www.shu.ac.uk/international/international-experience-team>

All appointments are confidential and will not go on your academic record.

**Quiz: True or False?**

1. A doctor can contact a student's teachers or parents to discuss the student's medical history, especially if the student has an appointment about contraception or sexually transmitted diseases (STIs)
2. There are 8 different methods of contraception
3. Oral contraception for women ("the pill") costs students £10 per month
4. There are some forms of contraception which can be taken once and last several weeks or many years
5. You can get free condoms from the medical centre at Sheffield Hallam University
6. There is a sexual health clinic in Sheffield
7. You must visit the doctor or the sexual health clinic if you want to get tested for STIs.
8. **Chlamydia** is the most common form of bacterial sexually transmitted disease
9. STIs (sexually transmitted infections) are only transmitted through **penetrative sex**
10. Condoms can prevent pregnancy and STIs
11. You get **symptoms** if you have an STI
12. It is **illegal** to be gay in the UK
13. If a woman urinates after sex, this reduces the chances of getting pregnant
14. If a man has good sexual control, he can use the **pulling out method** to prevent pregnancy
15. A woman can take the morning after pill ("emergency pill") and it will reduce the chances of pregnancy but is not completely reliable
16. Multiple abortions can have an effect on the chance of a woman having a successful pregnancy in the future

**Quiz Answers**

1. **FALSE.** Appointments are confidential and private. They are not recorded on your student academic record and no friends, teachers or family are told about the appointment occurring, or content of the appointment. Patient confidentiality is very strict in the UK. Confidentiality is only broken is there are serious concerns about a person's safety to themselves or to others.
2. **FALSE.** There are 15 different methods of contraception. You have the choice to find out the one that suits you the best! Different types include: the pill, condoms, female condom, contraception injection, the coil, the cap.

<http://www.nhs.uk/Conditions/contraception-guide/Pages/which-method-suits-me.aspx>

1. **FALSE.** The pill is free.
2. **TRUE.** Some contraception must be taken every time you have sex, for example condoms. Other forms of contraception can be taken once and last for varying amounts of time. Some last for several weeks, some last for several years. For example the intrauterine device (or coil) can last between 5 - 10 years. Or a contraceptive injection can be given to a woman and must be repeated 8 to 12 weeks depending on the injection. What type of contraception you and your partner wish to use will depend on your lifestyle, your age, your preferences, and your health.

<http://www.nhs.uk/Conditions/contraception-guide/Pages/which-method-suits-me.aspx#prefer>

1. **TRUE.** Students at Sheffield Hallam University can get free condoms from the medical centre
2. **TRUE.** You do not need to be referred by your doctor, you can simply make an appointment or have a drop-in. Visit the website for more details: Hallamshire Clinic B Road, Hallamshire Hospital, Glossop Road, S10 2JF <http://www.sexualhealthsheffield.nhs.uk/services/opening-times/>
3. **FALSE.** You can get a free and confidential testing kit from the Medical Centre. You can visit the sexual health clinic or doctor if you think you may have a sexually transmitted disease
4. **TRUE.** Chlamydia is the most common form of bacterial STI that can easily be passed on during vaginal, anal or oral sex. Depending on where a person becomes infected with chlamydia, it can be found in the vagina, rectum, urethra or throat. Even though chlamydia may be present, many people do not have any symptoms at all, although some people may experience an unusual discharge from the vagina or penis, pain when urinating or having sex or bleeding after sex. <http://www.sexualhealthsheffield.nhs.uk/info-and-advice/sti/bacterial-infections/chlamydia/>
5. **FALSE.** They can be transmitted through any type of sex. This includes penetrative sex, oral sex and mutual masturbation. <http://www.sexualhealthsheffield.nhs.uk/info-and-advice/sti/preventing-stis/>
6. **TRUE.** Condoms are a barrier method of contraception. They stop sperm from reaching an egg by creating a physical barrier between them. Condoms can also protect against STIs if used correctly during vaginal, anal and oral sex.
7. **FALSE.** No, you might not know if you have an STI. Many people don't notice signs of infection, so you won't always know if you're infected. You can't tell by looking at someone whether they've got an STI. If you're worried that you've caught an STI, visit your GP or local sexual health clinic. Check-ups and tests for STIs are free and confidential.
8. **FALSE**. It is legal to be gay, and there are laws in the UK which prevent any discrimination against somebody because they are gay.
9. **FALSE.** Urinating does not prevent pregnancy. Urinating after sex is recommended in order to reduce urinary tract infections. A urinary tract infection is common and can cause pain when urinating, pain in the tummy and a need to urinate frequently. However urinating does not prevent a pregnancy.
10. **FALSE**. A woman can still get pregnant. There's a myth that a woman can’t get pregnant if a man withdraws his penis before he ejaculates (comes). Pulling out the penis won’t stop a woman from getting pregnant. Before a woman ejaculates, there's sperm in the pre-ejaculatory fluid (pre-come), which leaks out when he gets excited. It only takes one sperm to get a woman pregnant. Pre-come can contain [STIs](http://www.nhs.uk/conditions/Sexually-transmitted-infections/Pages/Introduction.aspx), so withdrawing the penis won't prevent a woman from getting an infection. A man can stop themselves from leaking sperm before they come. Use a condom to protect yourself against STIs, and also use other contraception to prevent unwanted pregnancy.

<http://www.nhs.uk/Livewell/Sexandyoungpeople/Pages/Sexmythsbusted.aspx#withdraws>

1. **TRUE.** Emergency contraception can prevent pregnancy after unprotected sex or if your contraception method has failed. For example, if a condom breaks or you’ve missed a pill. The emergency contraception pill is also sometimes called the morning after pill. It can be difficult to know how many pregnancies the emergency pill prevents, because there is no way to know for sure how many women would have become pregnant if they did not take it. Emergency contraception is effective at preventing pregnancy if used soon after unprotected sex. The sooner you take emergency contraception, the more effective it will be. It is available from your GP and some pharmacies.
2. **TRUE.** Having an abortion will not usually affect your chances of becoming pregnant and having normal pregnancies in the future. However, repeated abortions can cause damage to your cervix and increase the risk of late miscarriages. An abortion can also affect someone emotionally.

**Useful Websites**

"Healthy Relationships": Online tutorial

<http://go.shu.ac.uk/healthyrelationships>

Sexual Health Sheffield

[www.sexualhealthsheffield.nhs.uk](http://www.sexualhealthsheffield.nhs.uk)

National Health Service (NHS)

[www.nhs.uk/LiveWell/sexualHealthtopics](http://www.nhs.uk/LiveWell/sexualHealthtopics)

Hallam Students Union - Healthy Hallam [www.hallamstudentsunion.com/advice\_help/healthy\_hallam](http://www.hallamstudentsunion.com/advice_help/healthy_hallam)

The Terrence Higgins Trust

[www.tht.org.uk/sexual-health](http://www.tht.org.uk/sexual-health)

International Experience Team

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